



#### **Overview**

- Joint Venture Background
- Populations Served

- Services
- Historical Workload
- Joint Venture Opportunities



## MOFH Vision & Mission



#### **Vision**

Maximize our integrated world-class AF/VA system to provide coordinated full-service healthcare

#### <u>Mission</u>

Provide world-class preventionfocused, quality healthcare that delivers maximal readiness



# Joint Venture Founding Charter



- Offer VA beneficiaries a local federal inpatient facility for the first time
- Replace outdated Nellis AFB hospital (1965)
- Improve the healthcare delivery system in the Las Vegas area for all eligible beneficiaries
- Promote greater sharing and optimize health resources between the Veterans Affairs (VA) and the Department of Defense (DoD)



# Joint Venture Concept of Operations



- Operate under both integrated and colocated concept
- Major support services in facility (e.g., lab, x-ray, ICU, pharmacy, and surgery) are integrated and staffed by AF and VA
- AF/VA negotiate services from each other based on a reasonable reimbursement schedule developed locally by the AF and VA



# Joint Venture History



- July 1991 Ground breaking for new facility
- Construction cost \$84M; 89% AF / 11% VA
- Medical equipment cost \$27M; 93% AF / 7% VA
- July 1994 Ribbon-cutting ceremony
  - Dedicated as the Mike O'Callaghan Federal Hospital on 13 November 1996
- First funded, planned, operational joint venture



## **Organizational Considerations**

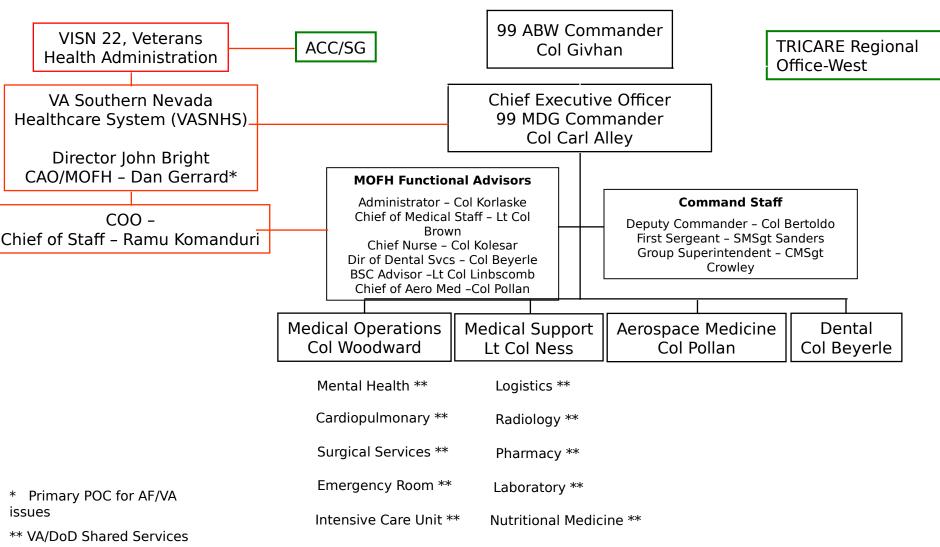


- Fundamental differences between AF and VA
  - Missions
  - Medical priorities
  - Patient populations
  - Policies
  - Organizational channels and controls



### **MOFH Organization**







#### Governance



- Joint Credentialing
- Joint Medical Staff Bylaws
- Single Chief Executive Officer
- Executive and Medical Councils alternately chaired by AF and VA



#### **TRICARE Enrollees**

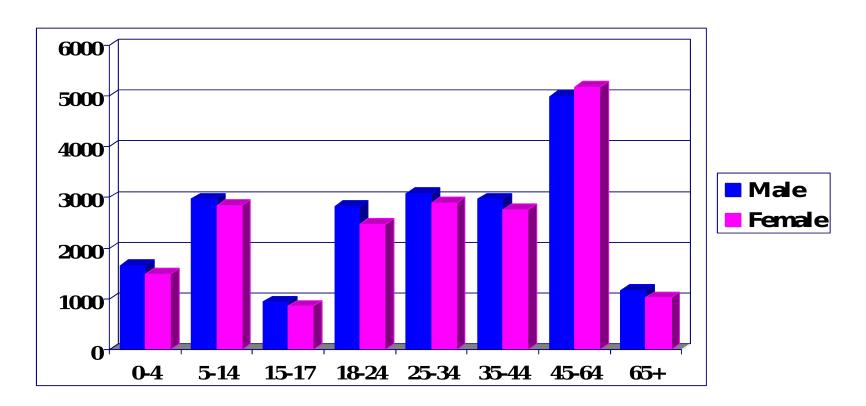
**By Gender/Age** 

As of 30 Nov 05



Total Eligible 72,972

**Enrolled 40,083** 



#### **Medicare Eligibles:**

16 006

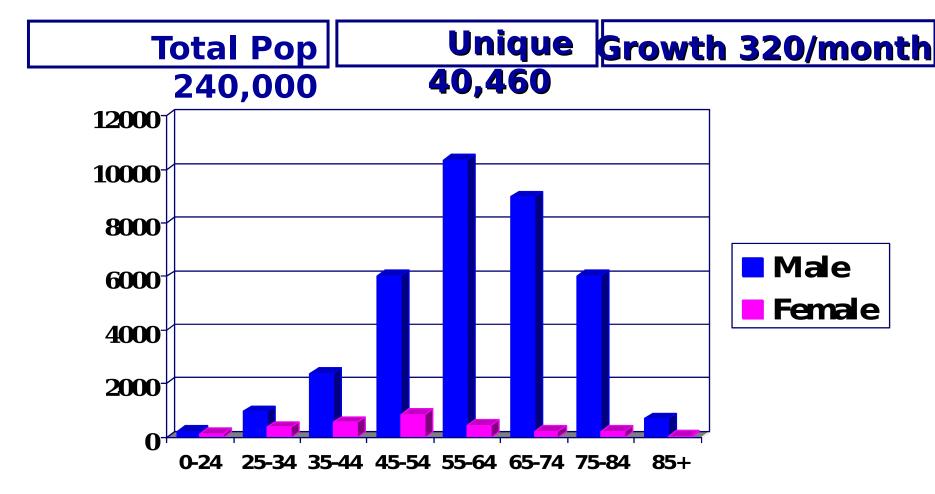


#### **VA Beneficiaries**

By Gender/Age

Fiscal Year 2005





Source: Business & Health

Administration



# MOFH Services Joint Staffed



- Anesthesia
- Blood Bank
- Cardiology\*
- Credentialing
- CT Scan\*
- ER Services\*
- Laboratory
- Logistics
- Medical Equipment Repair
- MOFH Security\*
- MRI\*

- Nutrition/Food Services
- **OR**
- Orthopedics
- PACU
- Pastoral Care
- Pharmacy-Inpatient
- Radiology
- Respiratory Therapy\*
- Surgery
- ICU

#### VA Staffeet Medicine\*

- Psychiatry (Inpatient)\*
- Cardio Thoracic\*
- Vascular\*
- Pulmonary\*



#### **MOFH Workload**



FY03 FY 04	<b>FY05</b>
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<b>DoD Beneficiaries</b>	70,251	72,19	90	73,092	
<b>AF "Prime" Enrollment</b>	3!	5,309	38,4	<b>423</b>	39,852
VA "Unique" Beneficiar	ies	<b>37</b>	,461	38,80	7 40,460
<b>Monthly AF Outpatient</b>	Visits	17,2	253	18,364	18,814
Monthly AF ER Registra	tions	2	2,393	2,534	2,629
AF Avg Daily Patient Lo	ad		<b>15</b>	16	12
VA Avg Daily Patient Lo	ad		<b>36</b>	38	48
AF/VA Avg Daily Admits		9		9	14

Source: CHCS & VA Reports



### **MOFH Workload**



<u>FY03</u> <u>F</u>	Y 04	FY 05		
Avg RXs Filled/Day		2,459	2,550	2,771
Avg Rad Wtd Proc/Ma Avg Meals Served/Da		4,512 15,780	4,788 16,101	4,923 17,256
Avg Lab Wtd Proc/Mo 29,557	onth	28,892	29,3	164
Avg AF Dent Visits/M 2,843	lonth	2,479	2,801	
Avg Surgeries/Month	1	258	282	387
Avg Deliveries/Montl	h	47	53	52



### **MOFH Bed Capacity**



Beds	VA	AF	New Beds	Cum Total
Med/Surg ICU OB Psych Current	34 6 0 14 54	28 2 11 0 41	0 0 0 0	62 8 11 14 95
Total	34	7.		
Step Down ICU			6	6
Projected				101



### Joint Venture Summation

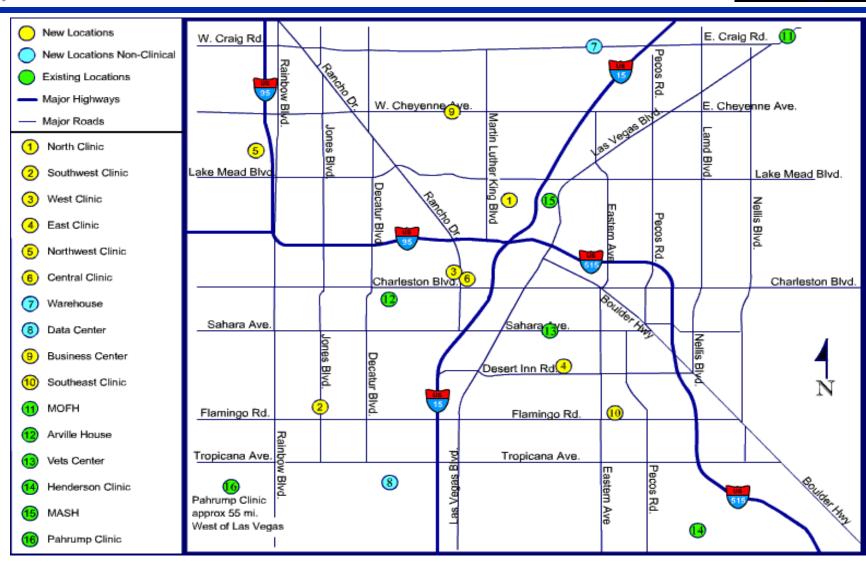


- Relationship is Win-Win
  - Enables AF to have in-house ICU and Surgery
  - Allows 40% charge for VA in-patient costs
- Success of relationship is driven by Great People
- Important Issues/Projects
  - AF/VA Growth
  - Access to the Hospital
  - ER Tower Project
  - VA Hospital
  - Joint Primary Care Clinic
  - In-house Graduate Medical Education



### **Map of VASNHS Facilities**







### Campus Concept



- Dual Facility Federal Healthcare System
- Facilities within 5 miles of each other
- Air Force benefit from Business, Readiness, and Wartime Skills
- VA benefit from technology, integrated staff and reduction of overhead





# Joint Venture Opportunities



- Continued Joint Procurement (Equipment Lease/Purchase, Facility Projects, Supplies)
- Expand Joint Venture Sharing;
   Gastroenterology, Cardiac, Oncology,
   Pulmonology, Cataract Surgery, Radiology,
   Gambling Addiction, Family Practice and
   potential use of CBOC
- Expanded TRICARE Sharing for VA
- Evaluate/Plan for potential of expansion of services through activation of new VA Medical Center

